(Print Name of lobbyist)

## STATE OF NEW HAMPSHIRE

## 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

OCT 25 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

11161	PLEASE P	RINT					DEPART	MENT OF S
I. Name of Lo	bbyist(s) David	Collins,	Gina Po	owers, G	lenn Wal	lace, R	<u>ichard</u>	Parson
II. Name of lo	bbyist's partnersh	p, firm or cor	poration, if a					
Rath, Yo	ung and Pig			_				
	(Name of partners	hip, firm or corp	oration)					
	tal Plaza		Conco	ord	NH		0330	)1
Business Addres	, ,		(Town/City)		(State)		(Zip Code)	
(603 226	6-2600 phone)	( <sup>603</sup> )_	226-270	0	-mail _dgc@	rathlaw	.com	
(Tele	phone)		(Fax	(3)				
_	able transactions occ					o the followin	ng client:	
	New Hampshire	of Client as it ar						
<u>OR</u>	(101111011)	or enone as it up	spears on are is	000) 101 1 1051011	,			
 □ All reportal	ble transactions by t ny particular client.	he lobbyist (inc	cluding the lot	bbyist's famil	y), or the lobb	ying firm liste	ed below w	hich are
IV. Date of Re	eport April 26, activity from date		o 3/31/17		26, 2017 m 4/1/17 to 6/3	0/17		
		25, 2017 <b>X</b> 7/1/17 to 9/30/1	7		uary 31, 2018 om 10/1/17 to 1.			
V. There hav If this box is ci Concord, NH	ve been no fees re hecked, complete ju 03301.	eceived and n st this form and	o reportable I submit it to t	e transactio the Secretary	ns made sine of State 's Offic	ce the last re ce, State Hous	e <b>port. Z</b> e, Room 20	<b>(</b> )4,
VI. Check if a	additional reports a	re attached:						
☐ If you hav	e received fees or n	ade expenditur	res, you must	file Addendu	m A- Fees an	d Expenses		
Expense Reim								
☐ If you, you	ur firm, or your fam	ily has made po	olitical contrib	butions, you n	nust file Adde	n <b>dum C</b> – Pol	itical Cont	ributions
I have read RS	nent/Affirmation b SA 15, RSA 15-B, R to the best of my kn	SA 14-C and F	RSA 664 and l	hereby swear	or affirm that	the foregoing	informatio	n is true
-AQ	Willi			_ (	October 25, 2	2017		
(Signature of	lobbyist)					(Date)		
David G	. Collins							